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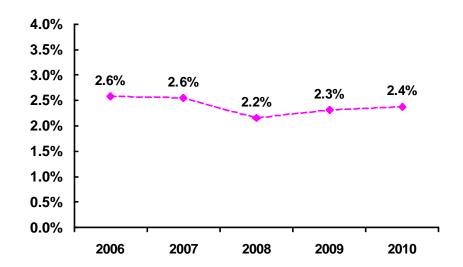
Nebraska Behavioral Risk Factor Surveillance System

# Stroke among Nebraska adults, 2010

#### 2010 Nebraska BRFSS Quick Facts:

- Overall, the percentage of adults who ever had a stroke has remained relatively stable over the past five years.
- There was not a significant difference in lifetime stroke prevalence between genders.
- Older Nebraskans were more likely to report having had a stroke than those who are younger.
- Adults who report having high blood pressure, high blood cholesterol, or diabetes were more likely to report having a stroke.

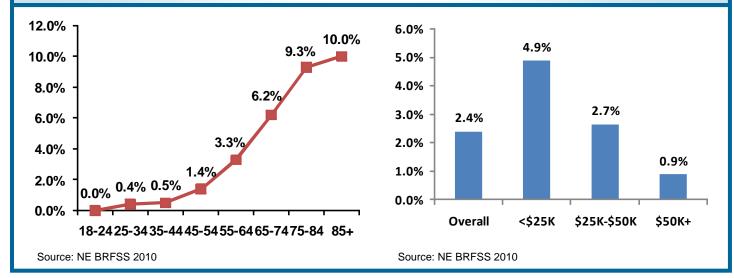
Figure 1: Percentage of Nebraska adults who ever had a stroke, by year, 2006-2010



Source: NE BRFSS 2006-10

Figure 2: Prevalence of stroke among adults, by age group, 2010

Figure 3: Prevalence of stroke among adults by household income. 2010



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## Stroke is the #4 leading cause of death in Nebraska.

### Symptoms of a stroke

- Sudden numbness or weakness of the face, arm, or leg, especially on one side of the body.
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
  - Sudden trouble walking, dizziness, loss of balance or coordination
  - Sudden, severe headache with no known cause

If you think that you or someone you know is having a stroke, you should call 9-1-1 immediately!

#### Risk factors for stroke:

- High blood pressure
- Unhealthy blood cholesterol level
- Overweight or obesity
- Lack of physical activity
- Family history of stroke
- Smoking
- Diabetes
- Metabolic syndrome
- Age
- Stress

#### For more information about stroke, contact:

Cardiovascular Health Program 301 Centennial Mall South, P.O. Box 95026 Lincoln, NE 68509-5026

Phone: 402-471-2101 Fax: 402-471-6446

Website: www.dhhs.ne.gov/cvh



## **About the Nebraska Behavioral Risk Factor Surveillance System**

The Nebraska Behavioral Risk Factor Surveillance System (BRFSS) has been conducting surveys annually since 1986 for the purpose of collecting data on the prevalence of major health risk factors among adults residing in the state. Information gathered in these surveys can be used to target health education and risk-reduction activities throughout the state in order to lower rates of premature death and disability.

The data presented in this report come from approximately 16,000 BRFSS landline telephone surveys conducted in Nebraska in 2010. Prevalence estimates are based on weighted data rather than raw numbers of responses to a question. The weights adjust for over— or under-sampling of age and gender groups.

To learn more about the Nebraska Behavioral Risk Factor Surveillance System, or to view additional reports, visit: <a href="https://www.dhhs.ne.gov/brfss">www.dhhs.ne.gov/brfss</a>